Special Invited Address Inclusion of Women in Research at NIH: A Look Back and View to the Future

As Deputy Director of the National Institutes of Health – and as the first Acting Director of the NIH's Office of Research on Women's Health, the first office within the Federal government dedicated to improving the health of women – I am delighted to participate in this scientific conference, "Science Meets Reality: the Recruitment and Retention of Women in Clinical Studies and the Critical Role of Relevance."

All who are active in the movement to improve women's health must acknowledge the foresight of Dr. Edward N. Brandt, who established the Public Health Service Task Force on Women's Health in 1983, sparking a new level of Federal commitment to addressing women's health issues. As co-chair of the Public Health Service Coordinating Committee on Women's Health Issues from 1983 to 1995, I had the privilege of participating in the formulation of policies and programs that embody the Federal government's commitment to improving the health of women. Nowhere has that commitment been more enthusiastically embraced and sustained than at the National Institutes of Health.

With the creation of the Office of Research on Women's Health in September 1990, the NIH committed itself to fulfilling a promise made to American women and their families: a promise to provide the scientific knowledge needed to improve the health, prolong the lives, and enhance the quality of life of all Americans, regardless of race, creed, age, geographic locality, or sex. Ten years ago, NIH Acting Director, Dr. William Raub, and the other leaders of the NIH recognized that, in order to increase our understanding of women's health, the NIH needed to address women's health issues in a more comprehensive and coherent way than had been possible in the past. The NIH Office of Research on Women's Health is the embodiment of that recognition and commitment.

Today, we examine the tangible achievements in women's health and the inclusion of women in clinical research made possible by the foresight and vision of Dr. Brandt and Dr. Raub and sustained over the past decade by individuals within the Executive Branch, including the former Secretary of the Department of Health and Human Services, Dr. Donna Shalala; individuals within the Public Health Service, including Dr. James Mason, Assistant Secretary for Health, Dr. Audrey Manley, former Deputy Assistant Secretary for Health; by the members of the bi-partisan Congressional Caucus on Women's Issues; and by the ongoing commitment and advocacy of individuals and organizations within the private sector.

For the past 12 years, the ORWH has been an effective and successful catalyst for women's health research. During ORWH's first decade, we have seen studies related to women's health integrated into the research portfolios of NIH Institutes and Centers to a remarkable degree. This speaks strongly to the effectiveness of the office under the able leadership of Dr. Vivian Pinn, who became the first full-time director of the ORWH in November 1991. Under Dr. Pinn's leadership, the ORWH has worked to foster, develop, and increase basic and clinical research on

diseases and conditions that affect women, to determine gaps in the medical community's knowledge of such conditions and diseases, and to identify areas of great scientific promise and pressing public health need.

Building on the work undertaken by the Task Force on Opportunities for Research on Women's Health at Hunt Valley, Maryland, in September 1991, the ORWH has, in the past 3 years, identified and assessed the enormous advances in basic and clinical science knowledge and linked them to a research agenda targeted to improve women's health. As a result of all these efforts of the past 12 years, there is now widespread, and largely unquestioned, recognition that researchers and clinicians must understand how differences in sex, gender, culture, and ethnic and socioeconomic background may influence the causes, diagnoses, progression, and treatment of diseases. This sea-change in perceptions and outlook is truly remarkable, and it is occurring at a time of unparalleled opportunity for women and for biomedical science.

At this moment in history, we perceive the light of a new dawn in medicine: Never before have the life sciences held such tremendous promise for alleviating human suffering. From advances in genetics to improvements in our understanding of the influence of behavior on health, we stand now at the threshold of boundless scientific opportunity and medical promise. Researchers on the NIH campus, along with NIH-supported investigators in every State, are working to ensure that the promise and potential of science are realized through new treatments and cures for a wide array of diseases and conditions that afflict humankind. At the same time, women are playing increasingly significant and visible roles in our national life, as elected officials and as members of professions traditionally dominated by men. Never before has it been more important to safeguard our Nation's health and prosperity by preserving and protecting the health of women and their families.

Working in partnership with other components of the NIH, the ORWH is sponsoring research aimed at developing strategies to encourage women to protect their health through improved nutrition, exercise, and other lifestyle changes. These studies reach out to women in the communities where they live and work. They help women to help themselves by adapting the fundamentals of health promotion and disease prevention for women of diverse cultures and ethnic backgrounds, geographic settings, and socioeconomic circumstances.

Ensuring the inclusion of women of diverse ages, ethnic backgrounds, and social and economic circumstances in clinical studies is a crucial part of keeping our promise to America's women. During the past 12 years, the ORWH, in concert with other components of the NIH, has worked to fulfill that promise by implementing NIH's revised and strengthened guidelines on the inclusion of women and minorities in clinical studies and through a new computerized tracking system to monitor women's inclusion in NIH-supported research. The ultimate goal of inclusion is to raise the general level of health enjoyed by all women through addressing the health issues of many diverse groups of women.

It is to all American women that the NIH is pledged and committed. Keeping our promise of ensuring that all women enjoy robust health requires the talents and resources of many individuals and groups. It is a promise that can only be fulfilled by engaging the hearts and minds of men and women alike. By giving men and women scientists an equal opportunity to pursue their hopes and dreams and to fulfill the promise of their natural gifts and talents, the NIH is also fulfilling its pledge to women and its promise to all Americans.

Through a wide variety of programs designed to encourage young women and young men to pursue careers in science and to undertake medical research related to women's health – as well as by initiating and sponsoring programs aimed at helping women to advance in their scientific careers – the ORWH plays a key role in fulfilling the NIH's promise of improved health for all Americans through science. From films and computer-based science curricula for middle and high school students to programs that enable investigators at the beginning of their careers to pursue research on women's health issues, the ORWH is helping to reshape the demographics and the culture of biomedical science.

When we look at the health of American women today, we see a picture as varied and diverse as the lives and roles of women themselves. Not all American women and their families enjoy the same level of health and health care. With so much that remains to be done to address the many pressing issues in women's health, it is easy to focus only on the challenges ahead, forgetting where we started and how far we have traveled. As Marie Curie once observed, "One never notices what has been done; one can only see what remains to be done."

We must recognize, however, that we have traveled far indeed, thanks to the efforts of thousands of women and men from every sector of American society. In celebrating the 12th anniversary of the Office of Research on Women's Health, we acknowledge their contributions and celebrate the power of our individual voices and collective actions to effect real change in government policies and programs.

In the coming decades, the NIH and the ORWH will continue to foster an approach to the study of women's health that encompasses the myriad of social, behavioral, and biological factors that influence health over the course of the life span. Only by addressing the multiplicity of factors that influence health can we improve the health and well-being of women in the 21st century. That is our challenge – and our promise for the future.